

Debtor Name **Flatironhotel Operations LLC**  
**United States Bankruptcy Court for the Southern District of New York**  
Case number (if known): **18-12342**

☐ Check if this is an amended filing

Official Form 206Sum

**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**

**1. Schedule A/B: Assets - Real and Personal Property** (Official Form 206A/B)

**1a. Real property:**

Copy line 88 from *Schedule A/B*..... \$0.00

**1b. Total personal property:**

Copy line 91A from *Schedule A/B*..... \$374,731.16

**1c. Total of all property:**

Copyline 92 from *Schedule A/B*..... \$374,731.16

**Part 2: Summary of Liabilities**

**2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of Schedule D..... \$0.00

**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

**3a. Total of amounts of priority unsecured claims:**

Copy the total claims from Part 1 from the line 5a of *Schedule E/F*..... \$1,261.92

**3b. Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total amount of claims from Part 2 from line 5b of *Schedule E/F*..... + \$2,235,878.88

**4. Total liabilities** .....

Lines 2 + 3a + 3b \$2,237,140.80

Debtor Name **Flatironhotel Operations LLC****United States Bankruptcy Court for the Southern District of New York**Case number (if known): **18-12342**☐ Check if this is an amended filingOfficial Form 206A/B**Schedule A/B: Assets - Real and Personal Property**

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Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be complete and accurate as possible. If more space is needed, attach a separate spreadsheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

**All cash of cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand**

\$1,500.00

**3. Checking, savings, money market, or financial brokerage accounts**

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1 JPMorgan Chase Bank, N.A. P.O. Box 659754 San Antonio, TX 78265-9754	Business Checking	1676	\$6,891.44

**4. Other cash equivalents****5. Total of Part 1**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$8,391.44****Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
- ☒ Yes. Fill in the information below.

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**Current value of  
debtor's interest**

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1	Capitol Specialty Insurance Corporation	Type - General Liability Premium - \$54,800.94	\$22,833.73
8.2	Great American Insurance Group	Type - Property Premium - \$64,091.00	\$26,704.58
8.3	Paramount Real Estate Group, Inc.	Type - Commercial Umbrella Liability Premium - \$4,323.38	\$1,801.41

**9. Total of Part 2**

Add lines 7 through 8. Copy the total to line 81.

**\$51,339.72**

**Part 3: Accounts Receivable**

**10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.  
☐ Yes. Fill in the information below.

**Current value of  
debtor's interest**

**11. Accounts receivable**

11a. 90 days old or less:	_____	-	_____	=
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	_____	-	_____	=
	face amount		doubtful or uncollectible accounts	

**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**Part 4: Investments**

**13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes. Fill in the information below.

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Valuation method  
used for current value

Current value of  
debtor's interest

14. **Mutual funds of publicly traded stocks not included in Part 1**

Name of fund or stock:

15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity: % of ownership:

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

17. **Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

**Part 5: Inventory, excluding agricultural assets**

18. **Does the debtor own any inventory (excluding agricultural assets)?**

- ☐ No. Go to Part 6.
- ☒ Yes. Fill in the information below.

General description		Date of the last physical inventory	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
19. <b>Raw Materials</b>					
19.1	Linens	12/21/2017	\$11,321.75	NBV	\$0.00
20. <b>Work in progress</b>					
21. <b>Finished goods, including goods held for resale</b>					
22. <b>Other inventory or supplies</b>					
22.1	Liquor	07/31/2018	\$15,000.00	Estimate	\$15,000.00
23. <b>Total of Part 5</b>					<b>\$15,000.00</b>
Add lines 19 through 22. Copy the total to line 84.					

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24. Is any of the property listed in Part 5 perishable?

- ☒ No.  
☐ Yes.

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No.  
☐ Yes. Book Value \$ \_\_\_\_\_ Valuation Method \_\_\_\_\_ Current Value \$ \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No.  
☐ Yes.

**Part 6:** Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
28. Crops - either planted or harvested			
29. Farm animals Examples: Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			
33. Total of Part 6 Add lines 28 through 32. Copy the total to line 85.			

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34. Is the debtor a member of an agricultural cooperative?

- ☐ No.  
☐ Yes.

Is any of the debtor's property stored at the cooperative?

- ☐ No.  
☐ Yes.

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☐ No.  
☐ Yes. Book Value \$ \_\_\_\_\_ Valuation Method \_\_\_\_\_ Current Value \$ \_\_\_\_\_

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☐ No.  
☐ Yes.

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☐ No.  
☐ Yes.

**Part 7:** Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.  
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			

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**40. Office fixtures**

40.1 Misc. Office Fixtures, including tables, chairs, and electronics

Unknown

**41. Office equipment, including all computer equipment and communication systems equipment and software**

41.1 Misc. Office Fixtures, including computers and transaction electronics

Unknown

**42. Collectibles**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

**43. Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

**44. Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No.

☐ Yes.

**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No.

☐ Yes.

**Part 8: Machinery, equipment, and vehicles**

**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

☐ No. Go to Part 9.

☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
<b>47. Automobiles, vans, trucks, motorcycles, trailers, or titled farm vehicles</b>			
<b>48. Watercraft, trailers, motors, and related accessories</b>			
Examples: Boats, trailers, motors, floating homes, personal watercraft, fishing vessels			

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49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

50.1	Misc. Furniture & Fixtures, including tables, chairs, beds, electronics, etc.	\$300,000.00	Estimate	\$300,000.00
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51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$300,000.00**

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No.

☐ Yes.

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No.

☐ Yes.

**Part 9:** Real property

54. **Does the debtor own or lease any real property?**

☒ No. Go to Part 10.

☐ Yes. Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.



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57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☐ No.  
☐ Yes.

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☐ No.  
☐ Yes.

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.  
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, or trade secrets			
61. Internet domain names and websites			
61.1 theflatironhotel.com	\$0.00	NBV	Unknown
62. Licenses, franchises, and royalties			
62.1 Additional Bar License	Unknown		Unknown
62.2 Catering Establishment License	Unknown		Unknown
62.3 Hotel Liquor License	Unknown		Unknown
63. Customer lists, mailing lists, or other compilations			
64. Other intangibles, or intellectual property			
65. Goodwill			

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66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

67. **Do your lists or records include personally identifiable information of customers?**

☐ No.

☒ Yes.

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

☒ No.

☐ Yes.

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

☒ No.

☐ Yes.

**Part 11: All other assets**

70. **Does the debtor own any other assets that have not yet been reported on this form?**

☐ No. Go to Part 12.

☒ Yes. Fill in the information below.

**Current value of  
debtor's interest**

71. **Notes receivable**

Description (include name of obligor)

	-	=
<hr/>	<hr/>	<hr/>
Total face amount	Doubtful or uncollectible amount	

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

72.1 Unused Net Operating Losses (NOLs)

Unknown

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

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**Nature of claim**

**Amount Requested**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

**Nature of claim**

**Amount Requested**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed**

Examples: Season tickets, country club membership

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No.

☐ Yes.

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**Part 12:** Summary

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1.</i>	\$8,391.44	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	\$51,339.72	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>		
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>		
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	\$15,000.00	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>		
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>		
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	\$300,000.00	
88. <b>Real Property.</b> <i>Copy line 56, Part 9.</i>		
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>		
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>		
91. <b>Total.</b> Add lines 80 through 90 for each column.	91a. <div style="border: 1px solid black; padding: 2px; display: inline-block;">\$374,731.16</div>	+ 91b. <div style="border: 1px solid black; padding: 2px; display: inline-block;">\$0.00</div>
92. <b>Total of all property on Schedule A/B.</b> Lines 91a + 91b = 92.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">\$374,731.16</div>	

Debtor Name **Flatironhotel Operations LLC****United States Bankruptcy Court for the Southern District of New York**Case number (if known): **18-12342**☐ Check if this is an amended filing**Official Form 206D****Schedule D - Creditors Who Have Claims Secured by Property**

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**Be as complete and accurate as possible****1. Do any creditors have claims secured by debtor's property?**

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.**Amount of Claim**  
Do not deduct the value of collateral**Value of collateral that supports this claim**

Creditor's name

**NONE**

Describe debtor's property that is subject to a lien

Creditor's mailing address

Describe the lien

Creditor's email address, if known

Date debt was incurred

Is the creditor an insider or related party?

- ☐ No
- ☐ Yes

Do multiple creditors have an interest in the same property?

- ☐ No
- ☐ Yes. Specify each creditor, including this creditor and its relative priority.
- ☐ No. Specify each creditor, including this creditor, and its relative priority.

Is anyone else liable on this claim?

- ☐ No
- ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines





Debtor Name

Flatironhotel Operations LLC

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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.1</b>	<b>Nonpriority creditor's name and mailing address</b> 123 BACKFLOW TESTING 30-10 35TH STREET 2ND FLOOR ASTORIA, NY 11103  <b>Date or dates debt was incurred</b> 07/25/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$646.88 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.2</b>	<b>Nonpriority creditor's name and mailing address</b> ABALON EXTERMINATING CO. INC 261 FIFTH AVENUE SUITE 1504 NEW YORK, NY 10016  <b>Date or dates debt was incurred</b> 12/01/2017 - 05/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$3,266.25 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.3</b>	<b>Nonpriority creditor's name and mailing address</b> ABC FIRE LIFE SAFETY 24-50 47TH ST ASTORIA, NY 11103  <b>Date or dates debt was incurred</b> 06/06/2017 - 05/18/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$1,962.97 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.4</b>	<b>Nonpriority creditor's name and mailing address</b> ABC STAR CLEANING ENTERPRISES CORP 2225 BENSON AVE APT. 2D BROOKLYN, NY 11214  <b>Date or dates debt was incurred</b> 07/15/2018 - 07/30/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$11,594.09 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes



**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.5</b>	<b>Nonpriority creditor's name and mailing address</b> ACCESS BOOKINGS LTD 53A TAMWORTH ROAD LICHFIELD, LE WS14 9HG UNITED KINGDOM  <b>Date or dates debt was incurred</b> 01/03/2017 - 06/30/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$263.01 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.6</b>	<b>Nonpriority creditor's name and mailing address</b> ACCURATE AIR TECHNOLOGY 30-47 70TH STREET NEW YORK, NY 11370  <b>Date or dates debt was incurred</b> 10/07/2015  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$442.03 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.7</b>	<b>Nonpriority creditor's name and mailing address</b> ADT SECURITY SERVICES 3190 S VAUGHN WAY AURORA, CO 80014  <b>Date or dates debt was incurred</b> 02/25/2017 - 06/26/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$3,579.68 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.8</b>	<b>Nonpriority creditor's name and mailing address</b> AETNA 151 FARMINGTON AVENUE HARTFORD, CT 06156  <b>Date or dates debt was incurred</b> 03/15/2017 - 07/26/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$48,276.14 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.9</b>	<b>Nonpriority creditor's name and mailing address</b> AGGRESSIVE ENERGY 78 RAPELYE STREET BROOKLYN, NY 11231  <b>Date or dates debt was incurred</b> 06/15/2017 - 05/16/2018  <b>Last 4 digits of account number</b> 22853	<b>As of the petition filing date, the claim is:</b> <b>\$596.57</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.10</b>	<b>Nonpriority creditor's name and mailing address</b> AGGRESSIVE ENERGY 78 RAPELYE STREET BROOKLYN, NY 11231  <b>Date or dates debt was incurred</b> 10/16/2017 - 06/15/2018  <b>Last 4 digits of account number</b> 22854	<b>As of the petition filing date, the claim is:</b> <b>\$37,314.84</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.11</b>	<b>Nonpriority creditor's name and mailing address</b> AGGRESSIVE ENERGY 78 RAPELYE STREET BROOKLYN, NY 11231  <b>Date or dates debt was incurred</b> 11/15/2017 - 06/15/2018  <b>Last 4 digits of account number</b> 22855	<b>As of the petition filing date, the claim is:</b> <b>\$1,992.43</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.12</b>	<b>Nonpriority creditor's name and mailing address</b> AGGRESSIVE ENERGY 78 RAPELYE STREET BROOKLYN, NY 11231  <b>Date or dates debt was incurred</b> 11/15/2017 - 06/15/2018  <b>Last 4 digits of account number</b> 22856	<b>As of the petition filing date, the claim is:</b> <b>\$6,294.83</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.13</b>	<b>Nonpriority creditor's name and mailing address</b> ALLIANCE RESERVATIONS NETWORK 428 E. THUNDERBIRD ROAD #247 PHEPNIX, AZ 85022  <b>Date or dates debt was incurred</b> 07/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$96.50</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.14</b>	<b>Nonpriority creditor's name and mailing address</b> ALTOUR INTERNATIONAL 1270 AVENUE OF THE AMERICAS #1520 NEW YORK, NY 10020  <b>Date or dates debt was incurred</b> 01/13/2017 - 06/21/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$543.84</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.15</b>	<b>Nonpriority creditor's name and mailing address</b> AMERICAN EXPRESS CHARGE CARD P.O. BOX 1270 NEWARK, NJ 07101  <b>Date or dates debt was incurred</b> 10/15/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$18,779.35</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.16</b>	<b>Nonpriority creditor's name and mailing address</b> AMERICAN EXPRESS TRAVEL RELATED SERVICES COMPANY, INC. C/O DANIEL MOKEN ZWICKER & ASSOCIATES, P.C 1105 LAUREL OAK ROAD, STE. 136 VOORHEES, NJ 08043  <b>Date or dates debt was incurred</b> Unknown  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>UNKNOWN</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.17</b>	<b>Nonpriority creditor's name and mailing address</b> AMERICAN TRAVEL SOLUTIONS 26707 WEST AGOURA RD. #204 CALABASAS, NY 91302  <b>Date or dates debt was incurred</b> 01/23/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$122.15 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.18</b>	<b>Nonpriority creditor's name and mailing address</b> AUTO-CHLOR SYSTEM 685 GOTHAM PKWY CARLSTADT, NJ 07072  <b>Date or dates debt was incurred</b> 09/25/2017 - 01/16/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$1,666.29 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.19</b>	<b>Nonpriority creditor's name and mailing address</b> AUTOMATIC DATA PROCESSING 99 JEFFERSON ROAD MS 220 PARSIPPANY, NJ 07054  <b>Date or dates debt was incurred</b> 07/30/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$509.76 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.20</b>	<b>Nonpriority creditor's name and mailing address</b> BIA ACCOUNT ADMINISTRATION 950 TRADE CENTRE WAY STE 240 PORTAGE, MI 49002  <b>Date or dates debt was incurred</b> 06/14/2018 - 07/13/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$13,795.43 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.21</b>	<b>Nonpriority creditor's name and mailing address</b> BOOKING.COM B.V 1000 BP AMSTERDAM NETHERLANDS  <b>Date or dates debt was incurred</b> 07/13/2017 - 07/06/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$230,039.32 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.22</b>	<b>Nonpriority creditor's name and mailing address</b> CAMPBELL RESOURCES, LTD 14800 LANDMARK BLVD SUITE 155 DALLAS, TX 75254  <b>Date or dates debt was incurred</b> 07/31/2016 - 10/16/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$325.75 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.23</b>	<b>Nonpriority creditor's name and mailing address</b> CINTAS 7700 BENT BRANCH DRIVE STE 130 IRING, TX 75063  <b>Date or dates debt was incurred</b> 05/05/2017 - 06/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$1,386.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.24</b>	<b>Nonpriority creditor's name and mailing address</b> CLEVELAND CIRCLE TRAVEL 1034 GREAT PLAIN AVENUE NEEDHAM, MA 02492  <b>Date or dates debt was incurred</b> 09/03/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$12.90 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim	
<b>3.25</b>	<b>Nonpriority creditor's name and mailing address</b> COMMISSIONERS OF THE STATE INSURANCE FUND C/O WILLIAM O'BRIEN, ESQ. 199 CHURCH STREET, 14TH FLOOR NEW YORK, NY 10007  <b>Date or dates debt was incurred</b> Unknown  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
<b>3.26</b>	<b>Nonpriority creditor's name and mailing address</b> COMMTRAK C/O WILLIAM O'BRIEN, ESQ. 199 CHURCH STREET, 14TH FLOOR NEW YORK, NY 10007  <b>Date or dates debt was incurred</b> 01/02/2018 - 02/19/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,231.70
<b>3.27</b>	<b>Nonpriority creditor's name and mailing address</b> COURTESY PRODUCTS 10840 LINPAGE PL ST. LOUIS, MO 63132  <b>Date or dates debt was incurred</b> 10/19/2017 - 01/17/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$554.63
<b>3.28</b>	<b>Nonpriority creditor's name and mailing address</b> D&W CENTRAL STATION 4818 VAN DAM STREET UNIT 2A LONG ISLAND CITY, NY 11101-3108  <b>Date or dates debt was incurred</b> 10/01/2017 - 07/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,780.90

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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.29</b>	<b>Nonpriority creditor's name and mailing address</b> DIVERSE RECYCLING SOLUTIONS, LLC 195 MONTAGUE STREET, 14TH FLOOR BROOKLYN, NY 11201  <b>Date or dates debt was incurred</b> 12/01/2017 - 07/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$10,147.16 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.30</b>	<b>Nonpriority creditor's name and mailing address</b> DIVERSE RECYCLING SOLUTIONS, LLC 195 MONTAGUE STREET, 14TH FLOOR BROOKLYN, NY 11201  <b>Date or dates debt was incurred</b> 11/01/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$517.16 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.31</b>	<b>Nonpriority creditor's name and mailing address</b> EAST COAST MECHANICAL CONTRACTING CORP 340 JACKSON AVENUE BRONX, NY 10454  <b>Date or dates debt was incurred</b> 01/19/2017 - 09/30/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$21,328.55 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.32</b>	<b>Nonpriority creditor's name and mailing address</b> EDGE LINEN SERVICES(HOLD) 2040 EDWIN AVENUE FORT LEE, NJ 07024  <b>Date or dates debt was incurred</b> 09/25/2016 - 10/19/2016  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$7,034.15 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.33</b>	<b>Nonpriority creditor's name and mailing address</b> ELISHA YOUNG 180 HULL STREET APT 2R BROOKLYN, NY 11233  <b>Date or dates debt was incurred</b> 12/12/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$200.00</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.34</b>	<b>Nonpriority creditor's name and mailing address</b> ELITE IN-FLITE SERVICES DIVISION OF ELITE AIRLINE LINEN OF NEW YORK INC. 11-07 REDFERN AVENUE FAR ROCKAWAY, NY 11691  <b>Date or dates debt was incurred</b> 03/09/2017 - 07/11/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$18,499.96</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.35</b>	<b>Nonpriority creditor's name and mailing address</b> EMERSON MIRANDA C/O BLYER & KURLAND PC ATTN: STEVEN R. BLYER, ESQ. 390 N. BROADWAY, SUITE 200 JERICHO, NY 11753  <b>Date or dates debt was incurred</b> Unknown  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>UNKNOWN</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.36</b>	<b>Nonpriority creditor's name and mailing address</b> EXPEDIA TRAVEL 275 MADISON AVE #1202 NEW YORK, NY 10016  <b>Date or dates debt was incurred</b> 11/01/2017 - 01/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$85,465.60</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes



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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

Amount of claim

<b>3.37</b>	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b>	<b>\$202.50</b>
	FILCO CARTING CORP. 197 SNEDIKER AVE BROOKLYN, NY 11207	<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
		AP TRADE	
	<b>Date or dates debt was incurred</b>		
	02/08/2017 - 03/01/2017		
	<b>Last 4 digits of account number</b>	<b>Is the claim subject to offset?</b>	
	Unknown	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.38</b>	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b>	<b>UNKNOWN</b>
	FIRST CENTRAL SAVINGS BANK 70 GLEN STREET GLEN COVE, NY 11542	<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
		UNKNOWN	
	<b>Date or dates debt was incurred</b>		
	Unknown		
	<b>Last 4 digits of account number</b>	<b>Is the claim subject to offset?</b>	
	Unknown	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.39</b>	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b>	<b>\$2,500.00</b>
	FLYNN & FLYNN, P.L.L.C. 198 BEACH 102ND STREET ROCKWAY BEACH, NY 11694	<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
		AP TRADE	
	<b>Date or dates debt was incurred</b>		
	11/01/2017		
	<b>Last 4 digits of account number</b>	<b>Is the claim subject to offset?</b>	
	Unknown	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.40</b>	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b>	<b>\$403.47</b>
	GANT TRAVEL MANAGEMENT 400 W. 7TH STREET, STE 233 BLOOMINGTON, IN 47404	<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
		AP TRADE	
	<b>Date or dates debt was incurred</b>		
	03/02/2017		
	<b>Last 4 digits of account number</b>	<b>Is the claim subject to offset?</b>	
	Unknown	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.41</b>	<b>Nonpriority creditor's name and mailing address</b> GLOBAL SECURITY GROUP INC 421 7TH AVE-4 FL NEW YORK, NY 10001-2002  <b>Date or dates debt was incurred</b> 03/18/2016  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$500.00</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.42</b>	<b>Nonpriority creditor's name and mailing address</b> HITECH CENTRAL AIR INC 954 LEXINGTON AVE #218 NEW YORK, NY 10021  <b>Date or dates debt was incurred</b> 12/26/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$212.30</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.43</b>	<b>Nonpriority creditor's name and mailing address</b> HOLIDAY INN NYC (HOLD) 125 WEST 26TH STREET NEW YORK, NY 10001  <b>Date or dates debt was incurred</b> 05/07/2015 - 05/07/2016  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$15,686.15</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.44</b>	<b>Nonpriority creditor's name and mailing address</b> HOTEL RESERVATION SERVICE ROBERT RAGGE GMBH BLAUBACH 32 COLOGNE/KOLN, 50676 GERMANY  <b>Date or dates debt was incurred</b> 01/20/2017 - 11/30/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$906.20</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

Amount of claim

<b>3.45</b>	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b>	<b>\$798.31</b>
	HOTELS BY DAY 545 FIFTH AVENUE STE#640 NEW YORK, NY 10010	<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<b>Date or dates debt was incurred</b> 06/03/2015 - 07/26/2018	<b>Basis for the claim:</b> AP TRADE	
	<b>Last 4 digits of account number</b> Unknown	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>3.46</b>	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b>	<b>UNKNOWN</b>
	HRC FUND V. REIT, LLC C/O HUDSON REALTY CAPITAL, LLC 250 PARK AVENUE SO. 3RD. FL. NEW YORK, NY 10003	<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	<b>Date or dates debt was incurred</b> Unknown	<b>Basis for the claim:</b> UNKNOWN	
	<b>Last 4 digits of account number</b> Unknown	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>3.47</b>	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b>	<b>UNKNOWN</b>
	JASPAN SCHLESINGER ATTN: STEPHEN P. EPSTEIN, ESQ. 300 GARDEN CITY PLAZA GARDEN CITY, NY 11530	<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	<b>Date or dates debt was incurred</b> Unknown	<b>Basis for the claim:</b> UNKNOWN	
	<b>Last 4 digits of account number</b> Unknown	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>3.48</b>	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b>	<b>\$333,320.69</b>
	JAY VASWANI 9 WEST 26TH STREET NEW YORK, NY 10010	<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<b>Date or dates debt was incurred</b> 01/22/2016 - 07/30/2018	<b>Basis for the claim:</b> AP TRADE	
	<b>Last 4 digits of account number</b> Unknown	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim	
<b>3.49</b>	<b>Nonpriority creditor's name and mailing address</b> KENSINGTON VANGUARD NATIONAL LAND 39 W 37TH ST. 7TH FLOOR NEW YORK, NY 10018  <b>Date or dates debt was incurred</b> Unknown  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> UNKNOWN  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
<b>3.50</b>	<b>Nonpriority creditor's name and mailing address</b> LEXYL TRAVEL TECHNOLOGIES 777 S FLAGLER DR SUITE 800, WEST TOWER WEST PALM BEACH, FL 33401  <b>Date or dates debt was incurred</b> 12/17/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17.77
<b>3.51</b>	<b>Nonpriority creditor's name and mailing address</b> LOIS LANE TRAVEL 230 FIFTH AVENUE NEW YORK, NY 10001  <b>Date or dates debt was incurred</b> 12/12/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$76.87
<b>3.52</b>	<b>Nonpriority creditor's name and mailing address</b> LOTUS GROUP LTD. 37-39 QUEEN ELIZABETH STREET LONDON, EC SE1 2BT UNITED KINGDOM  <b>Date or dates debt was incurred</b> 03/02/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$604.70

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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.53</b>	<b>Nonpriority creditor's name and mailing address</b> M3 ACCOUNTING & ANALYTICS 1715 N. BROWN ROAD BUILDING A, SUITE 200 LAWRENCEVILLE, GA 30043  <b>Date or dates debt was incurred</b> 01/19/2018 - 07/02/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$89.25</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.54</b>	<b>Nonpriority creditor's name and mailing address</b> MAESTRO PMS 65 ALLSTATE PARKWAY SUITE 100 MARHAM, ON L3R 9X1 CANADA  <b>Date or dates debt was incurred</b> 07/27/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$901.24</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.55</b>	<b>Nonpriority creditor's name and mailing address</b> METLIFE 200 PARK AVENUE NEW YORK, NY 10166  <b>Date or dates debt was incurred</b> 12/14/2017 - 07/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$1,934.50</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.56</b>	<b>Nonpriority creditor's name and mailing address</b> MINIBAR NORTH AMERICA, INC. 7340 WESTMORE ROAD ROCKVILLE, MD 20850  <b>Date or dates debt was incurred</b> 11/01/2017 - 07/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$9,436.86</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim	
<b>3.57</b>	<b>Nonpriority creditor's name and mailing address</b> MINIBAR NORTH AMERICA, INC. C/O GARY S. POSNER 7 SAINT PAUL ST BALTIMORE, MD 21202-1626  <b>Date or dates debt was incurred</b> Unknown  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
<b>3.58</b>	<b>Nonpriority creditor's name and mailing address</b> NEW YORK STATE INSURANCE FUND C/O WILLIAM O'BRIEN, ESQ. 199 CHURCH STREET, 14TH FLOOR NEW YORK, NY 10007  <b>Date or dates debt was incurred</b> 01/28/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,814.63
<b>3.59</b>	<b>Nonpriority creditor's name and mailing address</b> NICCI VASWANI ADDRESS REDACTED  <b>Date or dates debt was incurred</b> 11/20/2017 - 01/19/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,590.16
<b>3.60</b>	<b>Nonpriority creditor's name and mailing address</b> NIVO BACKFLOW 217 CENTRE STREET #400 NEW YORK, NY 10013  <b>Date or dates debt was incurred</b> 03/19/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,007.09

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.61</b>	<b>Nonpriority creditor's name and mailing address</b> NYC DEPT. OF FINANCE ATTN: LEGAL AFFAIRS - DEVORA COHN 345 ADAMS STREET, 3RD FLOOR BROOKLYN, NY 11201  <b>Date or dates debt was incurred</b> 10/20/2015 - 05/31/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$470,531.20 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.62</b>	<b>Nonpriority creditor's name and mailing address</b> NYC FIRE DEPARTMENT 9 METRO TECH CTR DOWNTOWN BROOKLYN, NY 11201  <b>Date or dates debt was incurred</b> 03/15/2017 - 05/16/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$23,340.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.63</b>	<b>Nonpriority creditor's name and mailing address</b> NYS DEPARTMENT OF TAXATION & FINANCE BANKRUPTCY/SPECIAL PROCEDURES SECTION P.O. BOX 5300 ALBANY, NY 12205-0300  <b>Date or dates debt was incurred</b> 11/30/2016 - 07/11/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$552,948.70 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.64</b>	<b>Nonpriority creditor's name and mailing address</b> NYS UNEMPLOYMENT INSURANCE P.O. BOX 551 ALBANY, NY 12201  <b>Date or dates debt was incurred</b> 05/07/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$60,385.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name Flatironhotel Operations LLC

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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

Amount of claim

<b>3.65</b>	<b>Nonpriority creditor's name and mailing address</b> ONYX CENTER SOURCE AS 544 PARK AVE SUITE 130 BROOKLYN, NY 11205  <b>Date or dates debt was incurred</b> 07/09/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,107.01</b>
<b>3.66</b>	<b>Nonpriority creditor's name and mailing address</b> OTA INSIGHT 1460 BROADWAY NEW YORK, NY 10036  <b>Date or dates debt was incurred</b> 02/26/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,088.00</b>
<b>3.67</b>	<b>Nonpriority creditor's name and mailing address</b> OVATION TRAVEL GROUP 71 FIFTH AVENUE 10TH FL NEW YORK, NY 10003  <b>Date or dates debt was incurred</b> 10/23/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$31.90</b>
<b>3.68</b>	<b>Nonpriority creditor's name and mailing address</b> P&W ELEVATORS 544 PARK AVE SUITE 130 BROOKLYN, NY 11205  <b>Date or dates debt was incurred</b> 11/01/2016 - 06/21/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$16,604.36</b>



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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.69</b>	<b>Nonpriority creditor's name and mailing address</b> PARITZ & COMPANY, P.A. 15 WARREN STREET HACKENSACK, NJ 07601  <b>Date or dates debt was incurred</b> 03/31/2017 - 09/30/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$49,477.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.70</b>	<b>Nonpriority creditor's name and mailing address</b> PRESTIGE LANE HOSPITALITY BRANDS ONE PRESTIGE LANE BRISTOL, CT 06010  <b>Date or dates debt was incurred</b> 03/09/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$553.43 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.71</b>	<b>Nonpriority creditor's name and mailing address</b> PRESTIGE VALET & CONCIERGE 75 W FOREST AVE ENGLEWOOD, NJ 07631  <b>Date or dates debt was incurred</b> 03/01/2016 - 04/02/2016  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$145.50 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.72</b>	<b>Nonpriority creditor's name and mailing address</b> PRIMARY AIR MECHANICAL CORP 204-18 42ND AVE #1A BAYSIDE, NY 11361  <b>Date or dates debt was incurred</b> 07/30/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$3,211.81 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.73</b>	<b>Nonpriority creditor's name and mailing address</b> QUILL CORPORATION 100 SCHELTER RD LINCOLNSHIRE, IL 60069  <b>Date or dates debt was incurred</b> 01/01/2016  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$3,523.76 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.74</b>	<b>Nonpriority creditor's name and mailing address</b> RELIANT SECURITY SERVICES, INC. 87-02 23RD AVE EAST ELMHURST, NY 11369  <b>Date or dates debt was incurred</b> 12/01/2017 - 02/16/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$38,724.66 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.75</b>	<b>Nonpriority creditor's name and mailing address</b> RELIANT SECURITY SERVICES, INC. C/O SCOTT LOCKWOOD, ESQ 375 COMMACK ROAD, SUITE 200 DEER PARK, NY 11729  <b>Date or dates debt was incurred</b> Unknown  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> UNKNOWN <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.76</b>	<b>Nonpriority creditor's name and mailing address</b> REVENUE OPTIMIZATION CONSULTANTS, LLC 347 WEST 36 STREET SUITE 802 NEW YORK, NY 10018  <b>Date or dates debt was incurred</b> 10/25/2017 - 11/25/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$7,000.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

Amount of claim

<b>3.77</b>	<b>Nonpriority creditor's name and mailing address</b> RICK BOGART 444 W 58TH ST APT 5E NEW YORK, NY 10019  <b>Date or dates debt was incurred</b> 09/29/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,200.00
<b>3.78</b>	<b>Nonpriority creditor's name and mailing address</b> ROYAL ABSTRACT 500 FIFTH AVE. SUITE 1540 NEW YORK, NY 10110  <b>Date or dates debt was incurred</b> Unknown  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> UNKNOWN  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
<b>3.79</b>	<b>Nonpriority creditor's name and mailing address</b> ROYAL REGISTERED PROPERTY 500 5TH AVE. SUITE 1540 NEW YORK, NY 10110  <b>Date or dates debt was incurred</b> Unknown  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> UNKNOWN  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
<b>3.80</b>	<b>Nonpriority creditor's name and mailing address</b> SABRE HOSPITALITY SOLUTIONS DIVISION OF SABRE GLBL INC, 7285 COLLECTION CENTER DRIVE CHICAGO, IL 60693  <b>Date or dates debt was incurred</b> 08/28/2017 - 06/30/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,758.73

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.81</b>	<b>Nonpriority creditor's name and mailing address</b> SANDITZ TRAVEL MANAGEMENT 98 WASHINGTON STREET MIDDLETOWN, CT 06457  <b>Date or dates debt was incurred</b> 12/31/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$17.90 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.82</b>	<b>Nonpriority creditor's name and mailing address</b> SHERWEB 95 BOULEVARD JACQUES CARTIER SUD SUITE 400 SHERBROOKE, QC J1J 2Z3 CANADA  <b>Date or dates debt was incurred</b> 11/27/2017 - 06/27/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$1,330.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.83</b>	<b>Nonpriority creditor's name and mailing address</b> STATE OF DELAWARE DIVISION OF CORPORATION P.O. BOX 5509 BINGHAMTON, NY 13902-5509  <b>Date or dates debt was incurred</b> 03/31/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$300.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.84</b>	<b>Nonpriority creditor's name and mailing address</b> TANGERINE TRAVEL, LTD. 10808 NE 145TH STREET BOTHELL, WA 98011  <b>Date or dates debt was incurred</b> 01/25/2018 - 05/15/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$875.43 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.85</b>	<b>Nonpriority creditor's name and mailing address</b> TEKCONN SERVICES INC 237 WEST 35TH STREET SUITE 805 NEW YORK, NY 10001  <b>Date or dates debt was incurred</b> 09/01/2017 - 04/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$7,639.98 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.86</b>	<b>Nonpriority creditor's name and mailing address</b> TELCO EXPERTS 169 RAMAPO VALLEY RD OAKLAND, NJ 07436-2509  <b>Date or dates debt was incurred</b> 02/01/2018 - 07/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$5,751.43 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.87</b>	<b>Nonpriority creditor's name and mailing address</b> THE ERIC RYAN CORPORATION 1 EARLY ST SUITE A ELLWOOD CITY, PA 16117  <b>Date or dates debt was incurred</b> 03/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$130.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.88</b>	<b>Nonpriority creditor's name and mailing address</b> TIME WARNER CABLE 60 COLUMBUS CIRCLE NEW YORK, NY 10023  <b>Date or dates debt was incurred</b> 02/01/2018 - 07/01/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> \$9,536.36 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

Amount of claim

<b>3.89</b>	<b>Nonpriority creditor's name and mailing address</b> TOTAL FIRE PROTECTION 5322 AVENUE N BROOKLYN, NY 11234  <b>Date or dates debt was incurred</b> 09/14/2016  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$734.91</b>
<b>3.90</b>	<b>Nonpriority creditor's name and mailing address</b> TRAVEL INCORPORATED 4355 RIVER GREEN PARKWAY DULUTH, GA 30096-9404  <b>Date or dates debt was incurred</b> 03/01/2017 - 06/25/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$299.95</b>
<b>3.91</b>	<b>Nonpriority creditor's name and mailing address</b> TRAVEL ONE, INC. 8009 34TH AVENUE SOUTH, SUITE 1500 MINNEAPOLIS, MN 55425  <b>Date or dates debt was incurred</b> 02/06/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$59.90</b>
<b>3.92</b>	<b>Nonpriority creditor's name and mailing address</b> TRAVELFOCUS, LLC DBA TSI USA 8111 LBJ FREEWAY SUITE 900 DALLAS, TX 75251  <b>Date or dates debt was incurred</b> 09/21/2016  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$151.60</b>

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.93</b>	<b>Nonpriority creditor's name and mailing address</b> TRIPADVISOR LLC 400 1ST AVENUE NEEDHAM, MA 02494  <b>Date or dates debt was incurred</b> 01/20/2017 - 03/20/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$237.18</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.94</b>	<b>Nonpriority creditor's name and mailing address</b> TRUST SECURITY & COMMUNICATIONS 321 SPOOKS ROCK ROAD UNIT A109 SUFFERN, NY 10901  <b>Date or dates debt was incurred</b> 06/01/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$27.22</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.95</b>	<b>Nonpriority creditor's name and mailing address</b> USA TODAY 535 MADISON AVE NEW YORK, NY 10022  <b>Date or dates debt was incurred</b> 12/27/2016  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$57.00</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.96</b>	<b>Nonpriority creditor's name and mailing address</b> VALERIE WILSON TRAVEL INC 39 LOCUST AVENUE SUITE 202 NEW CANAAN, CT 06840  <b>Date or dates debt was incurred</b> 12/30/2016  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$456.30</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name Flatironhotel Operations LLC

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Case number (if known): 18-12342

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.97</b>	<b>Nonpriority creditor's name and mailing address</b> VERIZON 1095 AVENUE OF THE AMERICAS NEW YORK, NY 10013  <b>Date or dates debt was incurred</b> 07/20/2017 - 07/28/2017  <b>Last 4 digits of account number</b> 619 727	<b>As of the petition filing date, the claim is:</b> <b>\$926.97</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.98</b>	<b>Nonpriority creditor's name and mailing address</b> VERIZON 1095 AVENUE OF THE AMERICAS NEW YORK, NY 10013  <b>Date or dates debt was incurred</b> 04/20/2017 - 08/13/2017  <b>Last 4 digits of account number</b> 627 2059	<b>As of the petition filing date, the claim is:</b> <b>\$1,790.42</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.99</b>	<b>Nonpriority creditor's name and mailing address</b> W&M SPRINKLER 50 BROADWAY HAWTHORNE, NY 10532  <b>Date or dates debt was incurred</b> 09/09/2016 - 12/22/2016  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$0.00</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.100</b>	<b>Nonpriority creditor's name and mailing address</b> W.B MASON CO., INC 59 CENTRE ST. BROCKTON, MA 02301-4014  <b>Date or dates debt was incurred</b> 01/23/2017 - 10/10/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$4,211.47</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes



Debtor Name **Flatironhotel Operations LLC**

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Case number (if known): **18-12342****Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<b>3.101</b>	<b>Nonpriority creditor's name and mailing address</b> WILLIAM ROAM 3131 NORTH FRANKLIN ROAD SUITE C  <b>Date or dates debt was incurred</b> 10/26/2017 - 03/26/2018  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$5,274.62</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.102</b>	<b>Nonpriority creditor's name and mailing address</b> WILLIAMBURG TRAVEL 2060 FRANKLIN WAY, #100 MARIETTA, GA 30067  <b>Date or dates debt was incurred</b> 12/15/2015  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$141.70</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.103</b>	<b>Nonpriority creditor's name and mailing address</b> WORLD TRAVEL INC 1724 WEST SCHUYKILL ROAD DOUGLASVILLE, PA 19518  <b>Date or dates debt was incurred</b> 12/12/2017  <b>Last 4 digits of account number</b> Unknown	<b>As of the petition filing date, the claim is:</b> <b>\$27.97</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> AP TRADE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name **Flatironhotel Operations LLC**

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Case number (if known): **18-12342****Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.****5a. Total claims from Part 1**

\$1,261.92

**5b. Total claims from Part 2**

\$2,235,878.88

**5c. Total claims of Parts 1 and 2**

Lines 5a + 5b = 5c

\$2,237,140.80

Debtor Name **Flatironhotel Operations LLC**

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**United States Bankruptcy Court for the Southern District of New York**Case number (if known): **18-12342**
☐ Check if this is an amended filing
**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15****Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B)

**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1	State what the contract or lease is for and the nature of the debtor's interest	<b>CLEANING SERVICE AGREEMENT</b>	<b>ABC STAR CLEANING ENTERPRISES CORP 2225 BENSON AVE APT. 2D BROOKLYN, NY 11214</b>
	State the term remaining	Unknown	
	List the contract number of any government contract	Unknown	
2.2	State what the contract or lease is for and the nature of the debtor's interest	<b>THIRD PARTY BOOKING SERVICES AGREEMENT</b>	<b>BOOKING.COM B.V P.O. BOX 414462 BOSTON, MA 02241-4462</b>
	State the term remaining	Unknown	
	List the contract number of any government contract	Unknown	
2.3	State what the contract or lease is for and the nature of the debtor's interest	<b>THIRD PARTY BOOKING SERVICES AGREEMENT</b>	<b>EXPEDIA TRAVEL 275 MADISON AVE #1202 NEW YORK, NY 10016</b>
	State the term remaining	Unknown	
	List the contract number of any government contract	Unknown	
2.4	State what the contract or lease is for and the nature of the debtor's interest	<b>IT PLATFORM AGREEMENT</b>	<b>MAESTRO PMS 65 ALLSTATE PARKWAY SUITE 100 MARHAM, ON L3R 9X1 CANADA</b>
	State the term remaining	Unknown	
	List the contract number of any government contract	Unknown	
2.5	State what the contract or lease is for and the nature of the debtor's interest	<b>MINIBAR EQUIPMENT LEASES</b>	<b>MINIBAR NORTH AMERICA 7340 WESTMORE ROAD ROCKVILLE, MD 20850</b>
	State the term remaining	Unknown	
	List the contract number of any government contract	Unknown	

Debtor Name **Flatironhotel Operations LLC**

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Case number (if known): **18-12342****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.6	State what the contract or lease is for and the nature of the debtor's interest	REVENUE MANAGEMENT AGREEMENT	REVENUE OPTIMIZATION CONSULTANTS, LLC 347 WEST 36 STREET SUITE 802 NEW YORK, NY 10018
	State the term remaining List the contract number of any government contract	Unknown Unknown	
2.7	State what the contract or lease is for and the nature of the debtor's interest	IT SERVICES AGREEMENT	SABRE HOSPITALITY SOLUTIONS DIVISION OF SABRE GLBL INC, 7285 COLLECTION CENTER DRIVE CHICAGO, IL 60693
	State the term remaining List the contract number of any government contract	Unknown Unknown	

Debtor Name **Flatironhotel Operations LLC****United States Bankruptcy Court for the Southern District of New York**Case number (if known): **18-12342**☐ Check if this is an amended filingOfficial Form 206H**Schedule H: Codebtors****12/15****Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.****1. Does the debtor have any codebtors?**☒ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.☐ Yes.**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G.** Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**Column 1: Codebtor****Column 2: Creditor****Name****Mailing Address****Name****Check all schedules  
that apply****NONE**

Debtor Name Flatironhotel Operations LLC  
United States Bankruptcy Court for the Southern District of New York  
Case Number: 18-12342

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING - Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets- Real and Personal Property* (Official Form 206 A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206 D)
- ☒ *Schedule E/F: Creditors Who Have Claims Unsecured Claims* (Official Form 206 E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206 G)
- ☒ *Schedule H: Codebtors* (Official Form 206 H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ *Other document that requires a declaration*

I, the Chief Restructuring Officer of the Flatironhotel Operations LLC, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 46 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Executed on: 9/14/2018  
MM / DD / YYYY

Signature /s/ James Katchadurian

James Katchadurian

Printed Name

Chief Restructuring Officer

Title